



STATE OF WASHINGTON  
POLICE TRAFFIC  
COLLISION REPORT



1591971

REPORT NO. **E347773**

CASE #	14-01908		
LOCAL AGENCY CODING	0664		
TOTAL # OF UNITS	01	OBJECT STRUCK	TREE OR STUMP

INTERSTATE	<input type="checkbox"/>	CITY STREET	<input checked="" type="checkbox"/>	FIRE RESULTED	<input type="checkbox"/>
STATE ROUTE	<input type="checkbox"/>	OTHER	<input type="checkbox"/>	STOLEN VEHICLE	<input type="checkbox"/>
COUNTY RD	<input type="checkbox"/>	PRIVATE WAY	<input type="checkbox"/>	HIT & RUN INVOLVED	<input type="checkbox"/>

TRIBAL RESERVATION	
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DATE OF COLLISION	08 - 09 - 2014	TIME (2400)	1856	COUNTY #	31	MILES		N	<input type="checkbox"/>	E	<input type="checkbox"/>	IN	<input checked="" type="checkbox"/>	OF	0664
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ON (PRIMARY TRAFFIC WAY)	INTERSECTION	<input checked="" type="checkbox"/>	NON-INTERSECTION	<input type="checkbox"/>		
20TH ST SE				BLOCK NO.	<input checked="" type="checkbox"/>	7100
				MILE POST	<input type="checkbox"/>	

DISTANCE		MILES	<input type="checkbox"/>	N	<input type="checkbox"/>	E	<input type="checkbox"/>	OF (REFERENCE OR CROSS STREET)	71ST AVE SE
		FEET	<input type="checkbox"/>	S	<input type="checkbox"/>	W	<input type="checkbox"/>		

UNIT 01	MOTOR VEHICLE	<input checked="" type="checkbox"/>	PEDAL-CYCLE	<input type="checkbox"/>	DAMAGE THRESHOLD MET	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	PHONE	
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LAST NAME	PETERSON	FIRST NAME	RONALD	MIDDLE INITIAL	W
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STREET NEW ADDRESS	13302 S MACHIAS ROAD
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CITY	SNOHOMISH	ST	WA	ZIP	98290
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CDL		RESTRICTIONS		ENDORSEMENTS	
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DRIVER'S LICENSE #	PETERRW5220A	STATE	WA	SEX	M	D.O.B.	MMDDYYYY	09	01	1948
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ON DUTY	<input type="checkbox"/>	STATUS	AIRBAG	1	RESTR.	9	EJECT	1	HELMET USE		INJURY CLASS	7	NATURE OF INJURIES	CUT TO NOSE
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LICENSE PLATE #	B21138L	STATE	WA	VIN#	CKY244Z123184
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TRAILER PLATE #		STATE		TRAILER PLATE #		STATE	
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VEH. YEAR	1974	MAKE	CHEV	MODEL	PICKUP	STYLE		VEHICLE TOWED	YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	TOWED BY	RESCUE TOWING	GOVT. VEHICLE	YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>
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REGISTERED OWNER INFO.	
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LIABILITY INSURANCE IN EFFECT	<input checked="" type="checkbox"/>	INSURANCE CO & POLICY #	ALLSTATE 0 07 478142 11/12
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VEHICLE LEGALLY STANDING	YES <input type="checkbox"/> NO <input type="checkbox"/>	CITATION #		CHARGE	
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UNIT 02	MOTOR VEHICLE	<input type="checkbox"/>	PEDAL-CYCLE	<input type="checkbox"/>	PEDESTRIAN	<input type="checkbox"/>	PROPERTY OWNER	<input type="checkbox"/>	DAMAGE THRESHOLD MET	YES <input type="checkbox"/> NO <input type="checkbox"/>	PHONE	
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LAST NAME		FIRST NAME		MIDDLE INITIAL	
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STREET NEW ADDRESS	
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CITY		ST		ZIP	
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CDL		RESTRICTIONS		ENDORSEMENTS	
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DRIVER'S LICENSE #		STATE		SEX		D.O.B.	MMDDYYYY			
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ON DUTY	<input type="checkbox"/>	STATUS	AIRBAG		RESTR.		EJECT		HELMET USE		INJURY CLASS		NATURE OF INJURIES	
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LICENSE PLATE #		STATE		VIN#	
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TRAILER PLATE #		STATE		TRAILER PLATE #		STATE	
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VEH. YEAR		MAKE		MODEL		STYLE		VEHICLE TOWED	YES <input type="checkbox"/> NO <input type="checkbox"/>	TOWED BY		GOVT. VEHICLE	YES <input type="checkbox"/> NO <input type="checkbox"/>
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REGISTERED OWNER INFO.	
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LIABILITY INSURANCE IN EFFECT	<input type="checkbox"/>	INSURANCE CO & POLICY #	
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VEHICLE LEGALLY STANDING	YES <input type="checkbox"/> NO <input type="checkbox"/>	CITATION #		CHARGE	
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OFFICER'S NAME (PRINT)	FRANKLIN NELSON	BADGE OR ID #	116	AGENCY	WA0311900
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STATE OF WASHINGTON  
POLICE TRAFFIC  
COLLISION REPORT



1591972

CORRECTION

REPORT NO. **E347773**

CASE # **14-01908**

ADDITIONAL PERSONS INVOLVED (PASSENGERS AND/OR WITNESSES ONLY)

NAME  
(LAST, FIRST, MIDDLE INITIAL)

ADDRESS & PHONE #

SEX

D.O.B.  
MMDDYYYY

PASSENGER ☐

WITNESS ☐

UNIT #

SEAT  
POS.

AIRBAG

RESTR.

EJECT

HELMET  
USE

INJURY  
CLASS

NATURE OF INJURIES

NAME  
(LAST, FIRST, MIDDLE INITIAL)

ADDRESS & PHONE #

SEX

D.O.B.  
MMDDYYYY

PASSENGER ☐

WITNESS ☐

UNIT #

SEAT  
POS.

AIRBAG

RESTR.

EJECT

HELMET  
USE

INJURY  
CLASS

NATURE OF INJURIES

NAME  
(LAST, FIRST, MIDDLE INITIAL)

ADDRESS & PHONE #

SEX

D.O.B.  
MMDDYYYY

PASSENGER ☐

WITNESS ☐

UNIT #

SEAT  
POS.

AIRBAG

RESTR.

EJECT

HELMET  
USE

INJURY  
CLASS

NATURE OF INJURIES

NARRATIVE

According to witnesses, Vehicle 1 was travelling east on the SR-2 off-ramp to eastbound 20th St SE, in Lake Stevens, when it swerved left hitting the gore point partition with the front driver side tire. The impact caused Vehicle 1 to veer left and cross two oncoming lanes of traffic before crashing into a tree just off the shoulder at the intersection of 20th St SE and 71st Ave SE in Lake Stevens. Vehicle 1 came to rest at this point.

I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT. (RCW 9A.72.085)

**FRANKLIN NELSON**

INVESTIGATING OFFICER'S SIGNATURE

UNIT OR DIST. DET

**08-09-14 08:46 PM**

DATED

PLACE SIGNED

APPROVED BY

**SGT. C. VALVICK 71**

DATE

**8/9/2014 9:59:48 PM**

BADGE OR ID #

**116**

ORI #

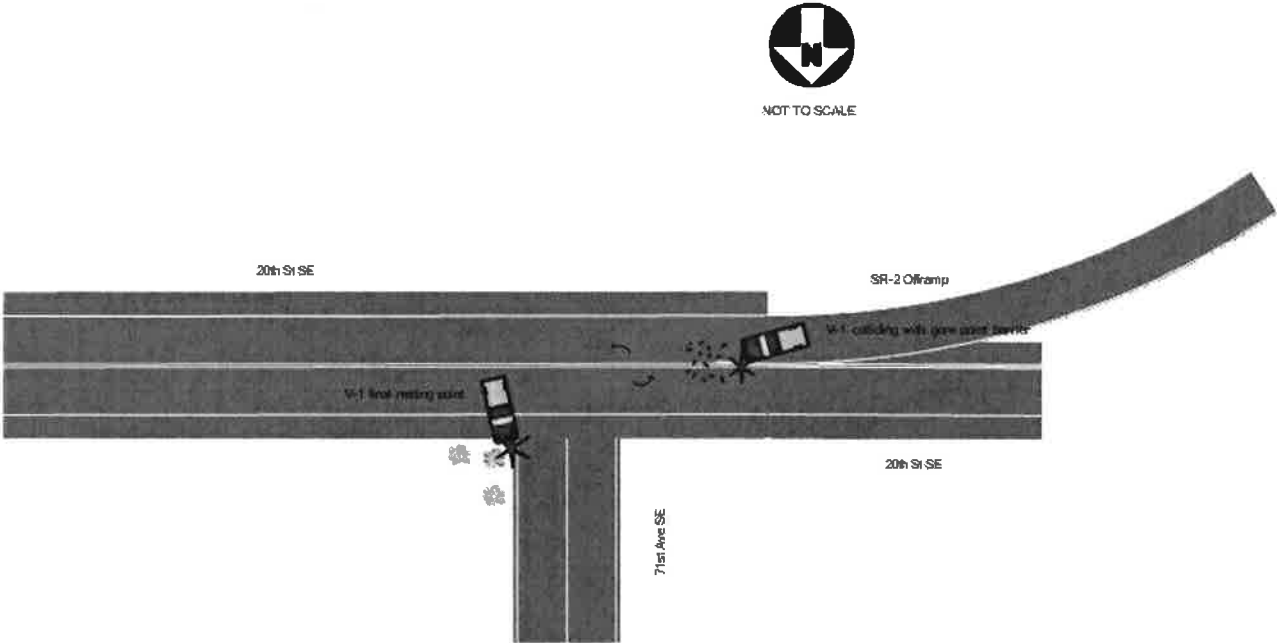
**WA0311900**

TIME POLICE DISPATCHED

**6:57 PM**

TIME POLICE ARRIVED

**6:59 PM**



# LAKE STEVENS POLICE DEPARTMENT

## VICTIM/WITNESS STATEMENT

CASE NUMBER

14-1908

### VICTIM / WITNESS

NON-DISC <input type="checkbox"/>	NAME (LAST, FIRST MIDDLE) Walkley, Kyle Ellis	RACE AI	ETH	SEX M	DOB 06/19/95	AGE 19	HGT 5'10"	WGT 166	HAIR Blk	EYES Brn
STREET ADDRESS 1028 49th Pl. SW		CITY Everett		STATE WA		ZIP 98203		RES. STATUS		
HOME PHONE 425-256-6251		CELL PHONE 425-923-9009		PLACE OF EMPLOYMENT None						
WORK PHONE		EMAIL ADDRESS walkleykyle@gmail.com								

I, Kyle Walkley, DID NOT GRANT, NOR TO MY KNOWLEDGE DID ANYONE ELSE OF PROPER AUTHORITY, GRANT ANYONE PERMISSION TO ENTER MY: (CIRCLE ONE) RESIDENCE, PROPERTY, AND/OR SUCH ASSET(S) UNDER MY CONTROL; NOR WAS PERMISSION GRANTED TO SUCH PERSON(S) TO TAKE ANY ITEMS(S) FROM, NOR COMMIT ANY ACT(S) THEREIN. I WILL PROSECUTE FOR SUCH ACTIONS COMMITTED.

The blue truck was in front of my car from Everett across the trussel. After reaching the fork on exit 20<sup>th</sup> street & Lake Stevens, the driver veered into the 20<sup>th</sup> street exit from the Lake Steven exit. The truck continued on this exit without slowing down. At the merging point, the driver lost control of his truck and bent his front left axle on the median. He then drove across the road towards a tree.

I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT

SIGNATURE: 	DATE SIGNED 8/9/14	LOCATION SIGNED Lake Stevens
OFFICER/NUMBER:	DATE SIGNED	LOCATION SIGNED

"The Lake Stevens Police Department is committed to a professional partnership with our community, by providing excellence in safety, service and education"

PAGE \_\_\_ OF \_\_\_

# LAKE STEVENS POLICE DEPARTMENT

## VICTIM/WITNESS STATEMENT

CASE NUMBER

14-1908

### VICTIM / WITNESS

NON-DISC <input type="checkbox"/>	NAME (LAST, FIRST MIDDLE) Gutierrez, Andres	RACE H	ETH	SEX M	DOB 01/25/96	AGE 18	HGT 5'4	WGT 200	HAIR black	EYES brown
STREET ADDRESS 6624 beverly blvd #1		CITY Everett		STATE WA		ZIP 98203		RES. STATUS		
HOME PHONE		CELL PHONE 425-879-5105			PLACE OF EMPLOYMENT NA					
WORK PHONE		EMAIL ADDRESS Eutfootball51@yahoo.com								

I, Andres Gutierrez, DID NOT GRANT, NOR TO MY KNOWLEDGE DID ANYONE ELSE OF PROPER AUTHORITY, GRANT ANYONE PERMISSION TO ENTER MY: (CIRCLE ONE) RESIDENCE, PROPERTY, AND/OR SUCH ASSET(S) UNDER MY CONTROL; NOR WAS PERMISSION GRANTED TO SUCH PERSON(S) TO TAKE ANY ITEMS(S) FROM, NOR COMMIT ANY ACT(S) THEREIN. I WILL PROSECUTE FOR SUCH ACTIONS COMMITTED.

I was driving down the tressel 2 car behind the blue truck that had crashed, what I saw was the blue truck turning and it hit the side <sup>to left</sup> wall then hit the bigger wall on the right and the left wheel popped and the blue truck went over the right and left lane after hitting the ~~ten~~ wall and almost hit a black car then it went straight into a tree and we parked uphill on the right and got out to see if he was still breathing and then my friend called the police, we also shut the engine off because we could smell gasoline.

I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT

SIGNATURE: 	DATE SIGNED 08/09/14	LOCATION SIGNED Lake Stevens, 20 <sup>th</sup> St. SE
OFFICER/NUMBER:	DATE SIGNED	LOCATION SIGNED

"The Lake Stevens Police Department is committed to a professional partnership with our community, by providing excellence in safety, service and education"

PAGE \_\_\_ OF \_\_\_

# LAKE STEVENS POLICE DEPARTMENT

## VICTIM/WITNESS STATEMENT

CASE NUMBER

14-1908

### VICTIM / WITNESS

NON-DISC <input type="checkbox"/>	NAME (LAST, FIRST MIDDLE) Gentzler, Marcell Allan Douglass	RACE White	ETH	SEX Male	DOB 02-23-96	AGE 18	HGT 6'1	WGT 170	HAIR Blonde	EYES Green
STREET ADDRESS 5030 Rucker Ave		CITY Everett			STATE WA	ZIP 98203	RES. STATUS			
HOME PHONE 425-317-8781		CELL PHONE 425-446-1793			PLACE OF EMPLOYMENT Red Robin					
WORK PHONE		EMAIL ADDRESS Marcell.Gentzler@hotmail.com								

I, Marcell Gentzler, DID NOT GRANT, NOR TO MY KNOWLEDGE DID ANYONE ELSE OF PROPER AUTHORITY, GRANT ANYONE PERMISSION TO ENTER MY: (CIRCLE ONE) RESIDENCE, PROPERTY, AND/OR SUCH ASSET(S) UNDER MY CONTROL; NOR WAS PERMISSION GRANTED TO SUCH PERSON(S) TO TAKE ANY ITEMS(S) FROM, NOR COMMIT ANY ACT(S) THEREIN. I WILL PROSECUTE FOR SUCH ACTIONS COMMITTED.

We were getting off the trussel when the blue truck in front of us was swerving and hit the median when his tire popped and he then started going across oncoming cars where he was almost hit by another car, after this, he crashed into a tree, his car is now leaking gas. We pulled over on the side of the road to see if he was okay. That's when my friend called 911, when I walked near the guy it smelt like alcohol.

I CERTIFY (OR DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREGOING IS TRUE AND CORRECT

SIGNATURE: <u>Marcell Gentzler</u>	DATE SIGNED 08-9-14	LOCATION SIGNED 20th Street Lake Stevens, SE of trussel
OFFICER/NUMBER:	DATE SIGNED	LOCATION SIGNED

"The Lake Stevens Police Department is committed to a professional partnership with our community, by providing excellence in safety, service and education"

PAGE \_\_\_ OF \_\_\_



CHECK ALL THAT APPLY:

- ☐ NON-IMPOUND / TOW  
☐ AAA or OTHER ROADSIDE ASSISTANCE  
☐ EVIDENCE  
☐ SEIZED UNDER RCW 69.50.505  
☒ IMPOUND ONLY  
☐ IMPOUND WITH \_\_\_\_\_ DAY HOLD  
☐ INFORMATIONAL COPY GIVEN TO SUSPENDED DRIVER.  
☐ REGISTERED OWNER MAY REDEEM \_\_\_\_\_

☐ CHECK INDICATES DRIVER IS DWLS/R AND IS NOT THE REGISTERED OWNER. REGISTERED OWNER / LEGAL OWNER OR AGENT OF THE OWNER MAY REDEEM AT THE END OF THE IMPOUND HOLD.

☐ CHECK INDICATES DRIVER IS DWLS/R AND IS THE REGISTERED OWNER. THEY WILL NEED A SEPARATE RELEASE FORM FROM THE COURT.

# UNIFORM WASHINGTON STATE TOW / IMPOUND AND INVENTORY RECORD

CASE / EVIDENCE NUMBER

14-01908

## VEHICLE INFORMATION

VIN C K Y 2 4 4 2 1 2 3 1 8 4			
LICENSE B2113XL	STATE WA	YEAR 1974	MAKE CITV
MILEAGE		STYLE PIU	MODEL Blue
<input type="checkbox"/> Report of Sale			

## DRIVER

NAME (LAST, FIRST, MI)  
 SAMIE AS LEGAL

STREET ADDRESS

CITY, STATE, ZIP CODE

DOB

## REGISTERED OWNER

NAME (LAST, FIRST, MI)

STREET ADDRESS

CITY, STATE, ZIP CODE

DOB

## LEGAL OWNER

NAME (LAST, FIRST, MI)  
PETERSON, RONALD W

STREET ADDRESS  
13802 S. MACHIAS RD

CITY, STATE, ZIP CODE  
SNODGRASS WA 98290

DOB  
09-01-48

## AUTHORIZATION AND RECEIPT

ON THIS DATE OF 080914 AT \_\_\_\_\_ (24 HOUR) PURSUANT TO RCW 46.55.085 / .113 AND HAVING PERSONALLY INVENTORIED THE ITEMS IN THE DESCRIBED VEHICLE, I HEREBY AUTHORIZE RESOLVE TOWING TO REMOVE THIS VEHICLE FROM 20th STREET SE @ 71st AVENUE SE. (TOWING FIRM)

I CERTIFY THAT I HAVE RECEIVED THE ABOVE VEHICLE AND ITS CONTENTS LISTED BELOW.

TOW DRIVER'S SIGNATURE Bar DOL TOW TRUCK NO. 5245 007 DATE 8914

EQUIPMENT	DAMAGE	EVIDENCE (DRIVER'S SIDE)	EVIDENCE (PASSENGER'S SIDE)
<input type="checkbox"/> GLOVE BOX LOCKED <input type="checkbox"/> KEYS [ ] <input type="checkbox"/> AUTO STEREO <input type="checkbox"/> AUDIO TAPES / CD'S [ ] <input type="checkbox"/> CB RADIO <input type="checkbox"/> RADAR DETECTOR <input type="checkbox"/> TRUNK LOCKED <input type="checkbox"/> SPARE TIRE <input type="checkbox"/> JACK <input type="checkbox"/> CHAINS <input type="checkbox"/> OTHER _____	<input type="checkbox"/> FRONT <input type="checkbox"/> R FRONT <input type="checkbox"/> R SIDE <input type="checkbox"/> R REAR <input checked="" type="checkbox"/> L FRONT <input type="checkbox"/> L SIDE <input type="checkbox"/> L REAR <input type="checkbox"/> REAR <input type="checkbox"/> TOP <input type="checkbox"/> UNDERCARRIAGE <input checked="" type="checkbox"/> OTHER WHEELS 4/6		

## INVENTORY

## NARRATIVE OR DIAGRAM

(List reason(s) for impound.)

NOT INVENTORIED

DUI COLLISION

I CERTIFY (DECLARE) UNDER PENALTY OF PERJURY UNDER THE LAWS OF THE STATE OF WASHINGTON THAT THE FOREMENTIONED IS TRUE AND CORRECT. (RCW 9A.72.085)

OFFICER'S SIGNATURE X [Signature]

SNODGRASS

BADGE NO. 1166

Incident History for: #SS14015606 Xref: #SS14015607 #AG14002273

Case Numbers: \$SS14001908

Entered 08/09/14 18:56:41 BY SPCT07 SP0328

Dispatched 08/09/14 18:57:32 BY SPDP17 ROGER

Enroute 08/09/14 18:57:32

Onscene 08/09/14 18:59:45

Initial Type: COLP Initial Alarm Level: Final Alarm Level:

Final Type: COLP (COLLISION, PRIORITY) Pri: 1 Dispo:

Police BLK: SS003 Fire BLK: AG1317 Map Page: 397C-4 Group: SS1 Beat: SOUT

Src: T

Loc: 20 ST SE/CAVALERO RD ,LKS (V)

Loc Info:

Name: TYRESE/PSBY

Addr: CELL

Phone: 4253503584

/1856 (SP0328) ENTRY ,ON 20TH - MALE UNCON  
/1857 SUPP TXT: BREATHING VFY'D - BLUE PICKUP - NO OTHER VE  
HS INVOLVED  
/1857 SUPP TXT: LEFT SHOULDER  
/1857 SUPP NAM: TYRESE/PSBY,  
ADR: CELL,  
PHO: 4253503584  
/1857 (ROGER ) DISPER 19N2 #SS116 NELSON, DET (FRANKIE)  
/1857 ASSTER 19N1 #SS104 LAMBIER, OFFICER (JEFF)  
/1857 ASSTER 19R1 #SS130 RUTHERFORD, OFCR (RICH)  
/1858 (SP0328) SUPP TXT: 60 YOM  
/1859 (ROGER ) ONSCNE 19N2  
/1900 ONSCNE 19N1  
/1900 ENROUT 19N1  
/1900 MISC 19N2 , C A B N, FACIAL LACERATION  
/1904 ONSCNE 19R1  
/1907 (\*\*\*\*\*) REMINQ 19N2 B21138L  
/1907 (ROGER ) REMINQ 19N2 LIC, 19N2, B21138L,,  
/1909 MISC 19N2 , WSP HAS UNIT ENR  
/1909 (\*\*\*\*\*) REMINQ 19N2 PETERSON. RONALD. W. 09011948..  
/1909 (ROGER ) REMINQ 19N2 NAME, 19N2, PETERSON, RONALD, W, 09011948,,  
/1910 ONSCNE 19N1  
/1911 \$CROSS #SS14015607  
/1911 DUP #SS14015607  
, PER 19030  
/1911 DUP NAM: AMOS, KEN  
PHO: 4257601535  
/1913 ASSTOS 19S11 [20 ST SE/CAVALERO RD ,LKS]  
#SS71 VALVICK, SGT (CRAIG)  
/1914 ROTREQ 19S11 TOW 5745 LKS RESCUE TOWING  
4253345821  
/1914 ASNCAS 19N2 \$SS14001908  
/1923 (SS130 ) REMINQ 19R1 MDTVEH, B21138L,, WA,,,,,,,,,  
/1925 (SS71 ) CLEAR 19S11  
/1925 (ROGER ) CLEAR 19N1  
/1933 (SP0352) CLEAR 19R1  
/1935 ASSTER 19R1 [20 ST SE/CAVALERO RD ,LKS]  
#SS130 RUTHERFORD, OFCR (RICH)  
/1937 (SS116 ) REMINQ 19N2 MDTVEH, B21138L,, WA,,,,,,,,,  
/1938 (SP0352) ONSCNE 19R1 [CAVALERO/20]  
, BLKING TRF  
/1943 MISC 19R1 , OPENING UP THE RDWY  
/1943 CLEAR 19R1  
/1945 CHGLOC 19N2 [LKS PD ]

ORIGINAL



